

# PATENT APPLICATION FEE DETERMINATION RECORD

Schedule for Form PTO-875

## CLAIMS AS FILED - PART I

(Column 1)

(Column 2)

SMALL ENTITY

OR

OTHER THAN SMALL ENTITY

| FOR   | NUMBER FILED | NUMBER EXTRA |
|---|--------------|--------------|
| BASIC FEE (37 CFR 1.1501)                         |              |              |
| TOTAL CLAIMS (37 CFR 1.1502)                      | claim 20     |              |
| INDEPENDENT CLAIMS (37 CFR 1.1503)                | claim 3      |              |
| MULTIPLE DEPENDENT CLAIMS PRESENT (37 CFR 1.1504) |              |              |

| RATE    | FEE     |
|---------|---------|
| \$ 0.00 | \$ 0.00 |
| \$ 0.00 | \$ 0.00 |
| \$ 0.00 | \$ 0.00 |
| \$ 0.00 | \$ 0.00 |
| TOTAL   |         |

| RATE    | FEE     |
|---------|---------|
| \$ 0.00 | \$ 0.00 |
| \$ 0.00 | \$ 0.00 |
| \$ 0.00 | \$ 0.00 |
| \$ 0.00 | \$ 0.00 |
| TOTAL   |         |

\* If the difference in column 1 is less than zero, enter "0" in column 2.

## CLAIMS AS AMENDED - PART II

(Column 1)

(Column 2)

(Column 3)

SMALL ENTITY

OR

OTHER THAN SMALL ENTITY

| CLAIMS REMAINING AFTER AMENDMENT                               | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |
|--|------------------------------------|---------------|
| Total of 37 CFR 1.1502   | 34                                 |               |
| INDEPENDENT OF 37 CFR 1.1503                                   | 4                                  |               |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.1504) |                                    |               |

| RATE           | ADDITIONAL FEE |
|----------------|----------------|
| \$ 0.00        | \$ 0.00        |
| \$ 0.00        | \$ 0.00        |
| \$ 0.00        | \$ 0.00        |
| TOTAL ADDL FEE |                |

| RATE           | ADDITIONAL FEE |
|----------------|----------------|
| \$ 0.00        | \$ 0.00        |
| \$ 0.00        | \$ 0.00        |
| \$ 0.00        | \$ 0.00        |
| TOTAL ADDL FEE |                |

| CLAIMS REMAINING AFTER AMENDMENT                               | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |
|--|------------------------------------|---------------|
| Total of 37 CFR 1.1502   | 34                                 |               |
| INDEPENDENT OF 37 CFR 1.1503                                   | 4                                  |               |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.1504) |                                    |               |

| RATE           | ADDITIONAL FEE |
|----------------|----------------|
| \$ 0.00        | \$ 0.00        |
| \$ 0.00        | \$ 0.00        |
| \$ 0.00        | \$ 0.00        |
| TOTAL ADDL FEE |                |

| RATE           | ADDITIONAL FEE |
|----------------|----------------|
| \$ 0.00        | \$ 0.00        |
| \$ 0.00        | \$ 0.00        |
| \$ 0.00        | \$ 0.00        |
| TOTAL ADDL FEE |                |

| CLAIMS REMAINING AFTER AMENDMENT                               | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |
|--|------------------------------------|---------------|
| Total of 37 CFR 1.1502   | 34                                 |               |
| INDEPENDENT OF 37 CFR 1.1503                                   | 4                                  |               |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.1504) |                                    |               |

| RATE           | ADDITIONAL FEE |
|----------------|----------------|
| \$ 0.00        | \$ 0.00        |
| \$ 0.00        | \$ 0.00        |
| \$ 0.00        | \$ 0.00        |
| TOTAL ADDL FEE |                |

| RATE           | ADDITIONAL FEE |
|----------------|----------------|
| \$ 0.00        | \$ 0.00        |
| \$ 0.00        | \$ 0.00        |
| \$ 0.00        | \$ 0.00        |
| TOTAL ADDL FEE | 780            |

\* If the entry in column 1 is less than the entry in column 2, enter "0" in column 3.

\*\* If the "Highest Number Previously Paid For" in THIS SPACE is less than 20, enter "20".

\*\*\* If the "Highest Number Previously Paid For" in THIS SPACE is less than 2, enter "2".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate parts column 1.

This collection of information is required by 37 CFR 1.16. The information is required to obtain or exclude a benefit by the public which is to be used by the USPTO to process an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the content of this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1400, Alexandria, VA 22304-4400. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1400, Alexandria, VA 22304-4400.

If you need assistance in completing this form, call 1-800-PTO-8100 and select option 2.

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# PATENT APPLICATION FEE DETERMINATION RECORD

Effective December 8, 2004

Application or Docket Number

09/794591

## CLAIMS AS FILED - PART I

|   | (Column 1)   | (Column 2)   |
|---|--------------|--------------|
| TOTAL CLAIMS  |              |              |
| FOR   | NUMBER FILED | NUMBER EXTRA |
| TOTAL CHARGEABLE CLAIMS                                   | minus 20=    | *            |
| INDEPENDENT CLAIMS  | minus 3 =    | *            |
| MULTIPLE DEPENDENT CLAIM PRESENT <input type="checkbox"/> |              |              |

\* If the difference in column 1 is less than zero, enter "0" in column 2

## CLAIMS AS AMENDED - PART II

4/10/06

|   | (Column 1)                       | (Column 2)                         | (Column 3)    |
|---|----------------------------------|------------------------------------|---------------|
| AMENDMENT A   | CLAIMS REMAINING AFTER AMENDMENT | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |
| Total   | * 34                             | Minus ** 34                        | = -           |
| Independent   | * 4                              | Minus *** 4                        | = -           |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/> |                                  |                                    |               |

|   | (Column 1)                       | (Column 2)                         | (Column 3)    |
|---|----------------------------------|------------------------------------|---------------|
| AMENDMENT B   | CLAIMS REMAINING AFTER AMENDMENT | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |
| Total   | *                                | Minus **                           | =             |
| Independent   | *                                | Minus ***                          | =             |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/> |                                  |                                    |               |

|   | (Column 1)                       | (Column 2)                         | (Column 3)    |
|---|----------------------------------|------------------------------------|---------------|
| AMENDMENT C   | CLAIMS REMAINING AFTER AMENDMENT | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |
| Total   | *                                | Minus **                           | =             |
| Independent   | *                                | Minus ***                          | =             |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/> |                                  |                                    |               |

\* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."

\*\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

SMALL ENTITY TYPE ☐

OR OTHER THAN SMALL ENTITY

| RATE      | FEE    | OR | RATE      | FEE    |
|-----------|--------|----|-----------|--------|
| BASIC FEE | 150.00 | OR | BASIC FEE | 300.00 |
| X\$ 25=   |        | OR | X\$50=    |        |
| X100=     |        | OR | X200=     |        |
| +180=     |        | OR | +360=     |        |
| TOTAL     |        | OR | TOTAL     |        |

SMALL ENTITY OR OTHER THAN SMALL ENTITY

| RATE             | ADDITIONAL FEE | OR | RATE             | ADDITIONAL FEE |
|------------------|----------------|----|------------------|----------------|
| X\$ 25=          |                | OR | X\$50=           |                |
| X100=            |                | OR | X200=            |                |
| +180=            |                | OR | +360=            |                |
| TOTAL ADDIT. FEE |                | OR | TOTAL ADDIT. FEE |                |

| RATE             | ADDITIONAL FEE | OR | RATE             | ADDITIONAL FEE |
|------------------|----------------|----|------------------|----------------|
| X\$ 25=          |                | OR | X\$50=           |                |
| X100=            |                | OR | X200=            |                |
| +180=            |                | OR | +360=            |                |
| TOTAL ADDIT. FEE |                | OR | TOTAL ADDIT. FEE |                |

| RATE             | ADDITIONAL FEE | OR | RATE             | ADDITIONAL FEE |
|------------------|----------------|----|------------------|----------------|
| X\$ 25=          |                | OR | X\$50=           |                |
| X100=            |                | OR | X200=            |                |
| +180=            |                | OR | +360=            |                |
| TOTAL ADDIT. FEE |                | OR | TOTAL ADDIT. FEE |                |